



## 2017 RCPA Conference *Connections*

**October 10–13, 2017**

Hershey Lodge, Hershey, PA



**Registration  
Opens August 7**

The RCPA Annual Conference Committee is pleased to announce another full conference agenda to meet your educational and networking needs. Once again, the Hershey Lodge promises opportunities to not only meet with your colleagues, but with state and legislative officials, as well as national leaders. Some highlights include:

- ▶ Keynote Speaker Commissioner Teresa Miller, named Secretary for the proposed Department of Health and Human Services, shares her vision for the new, unified department.
- ▶ Friday morning session from the Substance Abuse and Mental Health Services Administration (SAMHSA) regional representative and finally the state of the state.
- ▶ Sessions offered by our partners at the National Council for Community Behavioral Health (NCCBH),

American Network of Community Options and Resources (ANCOR), and ACCSES.

- ▶ Educational track focusing on physical disabilities and aging, the newest RCPA division, as well as many exciting and innovative business ideas.

As one of the most broadly attended and successful statewide events in the country, this year's conference is one you don't want to miss! Be sure to visit the RCPA annual conference [website](#) for all of your registration and conference needs. ◀



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AUGUST 2017

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*COO/Director, IDD Division*

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*Director, Drug & Alcohol Division,  
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©2017. This monthly newsletter is written by the Rehabilitation and Community Providers Association (RCPA) for the health and human services communities. Deadline for publication is the 20th of every month or the Friday before.

## SPECIAL FEATURE

## Does Your Human Services Agency Need a Digital Transformation?

Check out this informative [blog post](#) by Melissa Alvares of Sparkrock, focused on technology that improves the client/customer experience and also technology that can enable internal processes and satisfy the expectations of your own employees. ◀



## WEBINAR

## Federal ORP Requirements Webinar Preserving Patient Safety and Access Through Compliance

RCPA is hosting a free educational webinar on the Federal ORP (order, refer, or prescribe) Requirements on Wednesday, August 16, 2017, 1:00 pm – 3:00 pm. The webinar will be presented by David C. McAdoo, MBA, Executive Director, Southwest Behavioral Health Management, Inc. and Jamie Buchenauer, Director, Bureau of Fee for Services. Registration is required. Please [register here](#) to participate.

The Affordable Care Act requires all physicians including psychiatrists, physician assistants, and certified registered nurse practitioners to directly enroll in PA State Medicaid (PROMISE) to order, refer, or prescribe medications, testing, services, or other items billed to Medicaid. Any MD acting as the Medical Director in a licensed substance abuse or mental health facility must meet this requirement for the facility to bill Medicaid. Specifically, each psychologist, MD, CRNP, or PA touching the PA State Medicaid program must have at least one PROMISE ID under the NPI number on their license.

This webinar will address the requirement, the specific services that are covered, documentation that must be collected, the modifications needed in claims to bill Medicaid moving forward, and strategies for maintaining patient safety and uninterrupted access to medication and services during the transition to full compliance with this new requirement. ◀



### PROVIDER MEMBER

#### The Arc Alliance Advocacy Services

3075 Ridge Pike  
Eagleville, PA 19403  
Heather Revere, Executive Director

### BUSINESS MEMBER

#### DATIS HR Cloud

401 E Jackson St, Ste 1550  
Tampa, FL 33602  
Stephanie Kaselis  
Marketing Coordinator

*As the largest state association of its kind, RCPA continues to look for ways to strengthen its voice. One way to facilitate this is by the recruitment of new members. For new provider members, there are financial incentives for the first two years of membership. If you have questions about membership or know of an organization that would benefit from membership with RCPA, please contact [Tieanna Lloyd](#), Accounts Receivable/Membership Services Manager.*



## In the News

### Project Transition New Website

The staff at Project Transition are pleased to announce that they have updated their [website](#). The new format provides easy navigation so you can find the information you need.

### RCPA Member Hope Enterprises Elects New Chairman

Jerry L. Wertz has been elected Chair of the Hope Enterprises board for a two-year term, effective July 1. A member of the Hope board since 2011, Wertz most recently served as Vice Chair. Hope Enterprises has also announced their new officers. See full releases [here](#).

### WellSpan Unveils Behavioral Health Unit in Ephrata

Expanded facility highlights state-wide need for specialized care, full story [here](#) (*Central Penn Business Journal*, July 20, 2017)



## Why Contributing to RCPA-PAC Is Important

Now, more than ever, health and human service providers need to be proactive in helping candidates for elected office work towards common sense solutions in the areas of workforce, tax, regulation, health care, and human services.

Individually, you may choose to support candidates through your contributions and your vote. While the right to vote and your perspective on the issues are crucial, many still believe their voice is not heard throughout the process. So, what role does the Rehabilitation and Community Providers Association Political Action Committee (RCPA-PAC) play in amplifying the voice of health and human service providers?

Simply stated, RCPA-PAC is a non-partisan, member-driven tool that unifies providers of all sizes throughout our state and aids in educating key decision makers on the issues that are important to you. The PAC provides our members with the means for concerted political action. And, the dollars contributed through the RCPA-PAC are used to provide support for state and local governmental leaders campaigning for election who share your interests.

The RCPA-PAC provides an avenue for you to make a meaningful impact on the process — and by collectively mobilizing efforts (and your engagement), RCPA-PAC creates synergy. Together, we are greater than the sum of our parts and our strength in numbers allows us to lead the conversation on public policy matters in Pennsylvania.

Interested in learning more about the RCPA-PAC or how you can get involved in our advocacy efforts? Visit our [website](#) or e-mail [Jack Phillips](#), RCPA Director of Government Affairs.

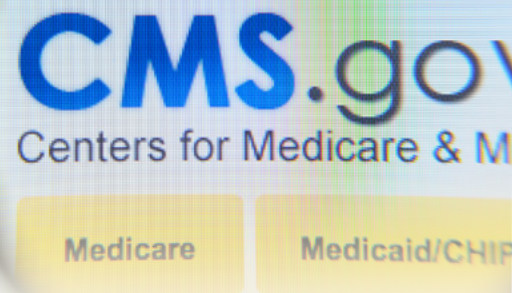
*Your participation in the RCPA-PAC is completely voluntary and you may contribute as much or as little as you choose. Donations are not tax-deductible and will be used for political purposes. You may choose not to participate without fear of reprisal. You will not be favored or disadvantaged by reason of the amount of your contribution or decision not to contribute. ◀*

## RCPA Bill Tracking Report

RCPA is tracking over 185 legislative bills and you may view the bill tracking report [here](#). If you have any questions, please contact [Jack Phillips](#), RCPA Director of Government Affairs.

## OPPS and MPFS Proposed Rules Released by CMS

On July 13, 2017, the Centers for Medicare and Medicaid Services (CMS) released two proposed payment rules, both of which include Requests for Information (RFIs):



### Hospital Outpatient Prospective Payment System

This [proposed rule](#) updates payment rates and policy changes in the Hospital Outpatient Prospective Payment System (OPPS) and Ambulatory Surgical Center (ASC) Payment System. The proposed rule is one of several for 2018 that reflect a broader strategy to relieve regulatory burdens for providers; support the patient-doctor relationship in health care; and promote transparency, flexibility, and innovation in the delivery of care. The OPPS and ASC payment system are updated annually to include changes to payment policies, payment rates, and quality provisions for those Medicare patients who receive care at hospital outpatient departments or receive care at surgical centers. Among the provisions in this rule, CMS is proposing to change the

payment rate for certain Medicare Part B drugs purchased by hospitals through the 340B program. The proposed rule also includes a provision that would alleviate some of the burdens rural hospitals experience in recruiting physicians by placing a two-year moratorium on the direct supervision requirement currently in place at rural hospitals and critical access hospitals (CAHs). In addition, CMS is releasing within the proposed rule a Request for Information (RFI) to welcome continued feedback on positive solutions to better achieve transparency, flexibility, program simplification and innovation in the Medicare program. CMS is also soliciting ideas for regulatory, sub-regulatory, policy, practice, and procedural changes to better

accomplish these goals. Ideas could include recommendations regarding payment system re-design; elimination or streamlining of reporting; monitoring and documentation requirements; operational flexibility; and feedback mechanisms and data sharing that would enhance patient care, support the doctor-patient relationship in care delivery, and facilitate patient-centered care within outpatient stays at hospitals and services performed at ambulatory surgical centers. Additional information available to members includes a [fact sheet](#). The proposed rule was published in the *Federal Register* on July 20, 2017. Comments on this proposed rule will be accepted until September 11, 2017. ◀

### Medicare Physician Fee Schedule (MPFS)

This [proposed rule](#) updates the Medicare payment, policies and quality provisions for physicians and other clinicians who treat Medicare patients in calendar year (CY) 2018. The proposed rule seeks public input via a request for information (RFI) on solutions to better achieve transparency, flexibility, program simplification, and innovation. CMS cites in the proposed rule its desire to start a national conversation about improving the health care delivery system; how Medicare can contribute to making the delivery

system less bureaucratic and complex; and how we can reduce the burden for clinicians, providers, and patients in a way that increases quality of care and decreases costs, thereby making the health care system more effective, simple, and accessible while maintaining program integrity and preventing fraud. CMS is soliciting ideas for regulatory, sub-regulatory, policy, practice, and procedural changes to better accomplish these goals. Ideas could include recommendations regarding

payment system re-design; elimination or streamlining of reporting; monitoring and documentation requirements; operational flexibility; and feedback mechanisms and data sharing that would enhance patient care, support the doctor-patient relationship in care delivery, and facilitate patient-centered care. Ideas could also include recommendations regarding when and how CMS issues regulations and policies and how

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## OPPS AND MPFS PROPOSED RULES

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CMS can simplify rules and policies for beneficiaries, clinicians, providers, and suppliers. In responding to the RFI, CMS should be provided with clear and concise proposals that include data and specific examples. The proposed rule also includes provisions to better align incentives and provide clinicians with a smoother transition to a new Merit-based Incentive Payment System under the Quality Payment Program. It also encourages more fair competition between hospitals and physician practices by promoting greater payment alignment, and it would improve the payment for office-based behavioral health services that are often the therapy and counseling services used to treat opioid addiction and other substance use disorders. CMS is also proposing several modifications to the rules for accountable care organizations (ACOs) participating in the Medicare Shared Savings Program. In addition, the proposed rule makes proposals to implement the Center for Medicare and Medicaid Innovation's (CMMI) Medicare Diabetes Prevention Program expanded model starting in 2018. CMS released a [fact sheet](#) to provide more detailed information. The proposed rule will be published in the *Federal Register* on July 21, 2017. Comments on this proposed rule will be accepted until September 11, 2017. ◀

## Subcommittee on Health for Ways & Means Committee Holds Hearing

On July 20, 2017, the Subcommittee on Health for the Ways & Means Committee held a hearing, [Examining Bipartisan Legislation to Improve the Medicare Program](#), which included a review of eleven bipartisan bills which would individually improve the Medicare program, and collectively, strengthen the program for current and future beneficiaries. Included in the [witnesses](#) was a Speech-Language Pathologist (SLP), the CEO of the American Physical Therapy Association (APTA), Chair of the Department of Neurology and Rehabilitation Medicine, University of Cincinnati Gardner Neuroscience Institute, among many others. Included in the legislative text is [HR 1148, Furthering Access to Stroke Telemedicine \(FAST\) Act of 2017](#) and [Discussion Draft of HR \\_\\_\\_\\_, To amend title XVIII of the Social Security Act to extend the therapy cap exceptions process and manual medical review under the Medicare program](#). ◀

## Slides and Audio Recording from Medicare Claims Appeal Process Call Available

The Centers for Medicare and Medicaid Services (CMS) hosted a conference call on June 29, 2017, on *Improvements to the Medicare Claims Appeal Process and Statistical Sampling*. The call focused on the new regulations related to the Medicare Appeals Process. The slides and audio recording from that call are now available on the CMS [website](#). ◀



## CMS Proposes Changes to CY 2018 Quality Payment Program

On June 30, 2017, the Centers for Medicare and Medicaid Services (CMS) published a [proposed rule](#) in the *Federal Register* that includes proposed updates for the second and future years of the Quality Payment Program (QPP), as required by the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA). CMS' goal is to simplify the program, especially for small, independent, and rural practices, while ensuring fiscal sustainability and high-quality care within Medicare. The proposed rule would amend some existing requirements and also contains new policies for physicians and clinicians participating in the QPP that would encourage participation in either [Advanced Alternative Payment Models](#) (APMs) or the [Merit-based Incentive Payment System](#) (MIPS). Additionally, CMS has used clinician feedback to shape the second year of the program. Comments on the proposed rule are due by Monday, August 21, 2017. ◀

## Office of Management and Budget Renews Hospital Discharge Appeal Requirement

On July 5, 2017, the Office of Management and Budget (OMB) renewed the requirements related to hospital discharge appeal notices. Hospitals must begin using the new [notices](#) by Monday, August 28, 2017. ◀

## Kathy Manderino Leaves Labor & Industry Department

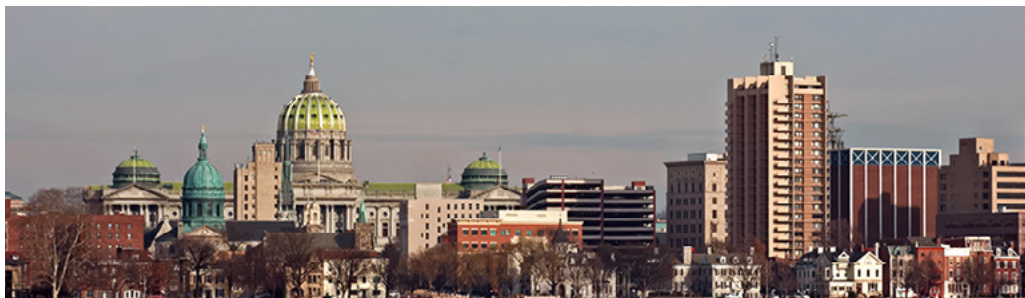
Kathy Manderino, the Secretary of Pennsylvania's Department of Labor and Industry (L&I) under Governor Tom Wolf, left the agency effective July 31, 2017. She will move to the Pennsylvania Gaming Board as a gubernatorial appointment. L&I is the agency in which the Office of Vocational Rehabilitation (OVR) is located. OVR provides employment services to people with disabilities, along with their partners in Pennsylvania's "one-stop" CareerLinks®, which is part of the state's workforce development system. Governor Wolf named Robert O'Brien to serve as L&I Acting Secretary until a permanent replacement is named. O'Brien is currently the agency's Executive Deputy Secretary. Manderino is a former state representative and is well-known for her support of the vocational rehabilitation program and people with disabilities in general. Additional information about this personnel change can be found in the [Governor's press release](#). ◀

## "Employment First" Legislation Introduced

[Senate Bill 21](#) was introduced on June 29, 2017. The purpose of the act is "to ensure that individuals with a disability be given the opportunity to achieve economic independence through jobs that pay competitive wages in community integrated settings." The legislation was introduced by Senator Bob Mensch (R – Berks, Bucks, and Montgomery Counties) and has 14 additional co-sponsors.

Among other things, the legislation establishes Commonwealth policy "that competitive employment in integrated settings shall be the preferred outcome for all working age adults and youth with disabilities, regardless of severity of disability and assistance required." In addition, the legislation places new obligations on "state, county, and local agencies and any entity providing publicly funded education, training, employment and related services, and long-term services and support for individuals with a disability" to pursue certain Employment First-related efforts. The Governor's Office would be required to develop a plan to implement the act and then issue annual reports on its progress. It would require state agencies to "make an effort" to employ individuals with a disability to the level of 7% of the overall state work force. Finally, Senate Bill 21

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## "EMPLOYMENT FIRST"

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would establish the "Governor's Cabinet for People with Disabilities" (currently, such an entity exists via [Executive Order 2006-09](#) but not in law), as well as the "Employment First Oversight Commission" to measure progress.

The bill has been referred to the Senate Labor and Industry Committee. RCPA is on record supporting "Employment First" philosophy and many of the efforts that have already been undertaken by the Wolf Administration to promote competitive-integrated employment, including [Executive Order 2016-03](#) and the development of [comprehensive recommendations to implement Executive Order 2016-03](#). ◀



## DHS Solicits Comments on Use of Electronic Visit Verification Systems

The Department of Human Services (Department) is soliciting public input on the use of electronic visit verification (EVV) systems for Medicaid-funded personal care and home health care services in Pennsylvania. The 21st Century Cures Act, Public Law 114-255, was signed into law on December 13, 2016. Section 12006 of the act (codified at 42 U.S.C. § 1396b(l)(1)) requires all states to implement the use of electronic visit verification for Medicaid-funded personal care and home health care services. EVV is a system that electronically verifies that personal care and home health care services were delivered. According to the Act, EVV for personal care services must be implemented by January 1, 2019, and for home health care services by January 1, 2023. The EVV system may be maintained and operated by the state, a state contractor, or a provider agency.

The act requires that the system verify the type of service provided, individual receiving the service, individual providing the service, date of the service, location of the service delivery, and time the service begins and ends. Services may be verified by the recipient's home landline telephone, smart phone, biometric recognition systems, or fixed visit verification device – an electronic random numbers device in the beneficiary's home. EVV will be required for personal care and home health care services provided in the following Medical Assistance programs:

- ▶ Act 150 Attendant Care Program;
- ▶ Adult Autism Waiver Program;
- ▶ Adult Community Autism Program;
- ▶ Aging Waiver Program;
- ▶ Attendant Care Waiver Program;
- ▶ COMM CARE Waiver Program;
- ▶ Community HealthChoices Program;
- ▶ Consolidated Waiver Program;
- ▶ Fee-For-Service;
- ▶ HealthChoices Program – Physical and Behavioral Health;
- ▶ Independence Waiver Program;
- ▶ OBRA Waiver Program; and
- ▶ Person/Family-Directed Support Waiver Program.

DHS is soliciting input from beneficiaries, family caregivers, provider agencies, individuals who furnish personal care services or home health care services, managed care organizations, and other stakeholders on the current use of EVV in the Commonwealth and the impact of EVV implementation. DHS intends to implement the EVV requirements so that the system is minimally burdensome and will take into account the input from stakeholders. Input received within 30 days will be reviewed and considered as the department works to comply with the EVV requirements. Input should be submitted via [email](#). View the text of the [21st Century Cures Act](#). ◀



## CMS Policy Impacts Payment for Accessories for Group 3 Complex Rehab Power Wheelchairs

The Centers for Medicare and Medicaid Services (CMS) recently [announced](#) their intent to adopt a new interpretation of the statute that impacts how adjustments to the fee schedule based on information from competitive bidding programs apply to wheelchair accessories used with Group 3 complex rehabilitative power wheelchairs. As of July 1, 2017, the fee schedule amounts for wheelchair accessories and back and seat cushions used with Group 3 complex rehabilitative power wheelchairs will not be adjusted using information from the Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program. Instead, the fee schedule amounts will be based on the unadjusted fee schedule amounts updated by the annual fee schedule covered item update. Suppliers are being instructed to continue to use the KU modifier when billing for wheelchair accessories and seat and back cushions furnished connection with Group 3 complex rehabilitative power wheelchairs with dates of service beginning July 1, 2017. This new action will help to protect access to complex rehabilitative power wheelchair accessories for those individuals that depend on them. ◀

## IRF Quality Reporting Program Refresher Training

The Centers for Medicare and Medicaid Services (CMS) announced it will host an inpatient rehabilitation facility (IRF) quality reporting program (QRP) refresher training webinar. The [webinar](#) is scheduled for August 15, 2017 from 2:00 pm to 4:00 pm ET. The primary focus of the webinar is to provide additional training and guidance on correct data collection and submission procedures for the IRF PAI 1.4 and information on preliminary trends from the data analysis of new items that went into effect on October 1, 2016. A demonstration on how to access resources available on the [CMS website](#) to assist providers in better understanding the IRF QRP will also be provided. Those interested should [register](#) to participate. ◀

## IRFs Reminded of August IRF QRP Data Submission Deadline

Inpatient Rehabilitation Facilities (IRFs) are reminded of the submission deadline for quarter one (Q1) (January 2017–March 2017) calendar year (CY) 2017 IRF Quality Reporting Program (QRP) data. The [measures](#) are due by Tuesday, August 15, 2017. ◀



## TBI Advisory Board Meeting Scheduled for August 4

The Traumatic Brain Injury (TBI) Advisory Board, which is established under section 1252 of the Federal Traumatic Brain Injury Act of 1996, will convene for its public meeting on Friday, August 4, 2017, from 10:00 am to 3:00 pm in the large conference room of the Community Center, 2nd Floor, Giant Food Store located at 2300 Linglestown Road, Harrisburg, PA 17110.

The Board assists the Department of Health in understanding and meeting the needs of persons living with traumatic brain injury and their families. This quarterly meeting will provide updates on a variety of topics including the number of people served by the Department of Health's Head Injury Program (HIP). In addition, meeting participants will discuss budgetary and programmatic issues, community programs relating to traumatic brain injury, and available advocacy opportunities.

For additional information, or for persons with a disability who wish to attend the meeting and require an auxiliary aid, service, or other accommodations to do so, please contact Michael Yakum, Division of Community Systems Development and Outreach, 717-772-2763. For speech and/or hearing impaired persons, contact V/TT 717-783-6514 or the Pennsylvania AT&T Relay Service at 800-654-5984. ◀

## Upcoming Webinars Announced by BIAA

The Brain Injury Association of America (BIAA) recently announced its schedule for upcoming [live webinars](#). Registration is required to participate and ends two days prior to the date of the live webinar. ◀

## OLTL Documents Outline Upcoming COMM CARE Waiver Transition

The Office of Long-Term Living (OLTL) released two documents for direct service providers that serve COMM CARE Waiver participants. The documents outline the activities that will occur in the coming months as the COMM CARE Waiver participants transition to either the Community HealthChoices (CHC) program or the Independence Waiver. These documents include a [detailed overview and timeline](#) of the transition and a [fact sheet](#) about CHC. The COMM CARE Waiver will end statewide on December 31, 2017. OLTL Service Coordination Entities (SCEs) and participants will have been notified of these changes in a separate communication by mid-July. ◀

# Mental Health

## Outpatient Redesign Work Group Update

RCPA convened a work group to focus on the outpatient care delivery system currently in Pennsylvania and the steps necessary to move toward a sustainable model for the future. The work group has more than forty participants from providers across the state. The initial goal is to have offered a position paper to the RCPA state partners by August 1, 2017.

The paper will feature ideas and solutions to the collapsing outpatient system of care in Pennsylvania, identifying both clinical and financial changes that must be made for ongoing sustainability. This work group will continue to meet as needed and is not a closed group. If you are interested in participating in future meetings, please contact [Sarah Eyster](#) for more information. ◀

## CCBHCs Go Live in PA

Certified Community Behavioral Health Clinics (CCBHCs) began their pilots on July 1. After more than one year of preparation, the clinics were able to put their hard work to the consumer test. With just two providers weighing in, it seems as though startup has been fairly smooth. One provider reports that the screening process has been extremely effective and is more engaging for prospective consumers. The initial evaluation is more comprehensive and holistic in identifying the needs of the people seeking service, but it is more time consuming, so the provider has used peer support staff to help keep the individuals engaged. The same organization is reporting an immediate improvement in the collaboration between drug and alcohol and mental health services. RCPA continues to support the CCBHC pilot in Pennsylvania through serving on the CCBHC Advisory Committee. ◀





**Special  
Training  
Session  
August 31**

## Marijuana Update: New Legislation, Clinical Considerations, and Evidence-Based Indications

RCPA will be holding a special training session on August 31 — Marijuana Update: New Legislation, Clinical Considerations, and Evidence-Based Indications. Act 16 in Pennsylvania has legalized the use of non-FDA approved cannabis compounds for use in the treatment of serious medical conditions. Marina Goldman, MD, is an expert in this arena and will be presenting a detailed overview of cannabis; the addictive potential, cannabis use disorder in adolescents, and treatment using specific targeted interventions. The training will be held at the Best Western Premier, 800 East Park Drive, in Harrisburg. The training is being co-sponsored by Southwest Behavioral Health Management and Capital Area Behavioral Health Collaborative; this will help lower the costs for participants. Registration details will be sent out soon. ◀

### RCPA D&A Membership Survey: DEADLINE EXTENDED

A [brief survey](#) was sent out in early July, to help RCPA identify the needs of its drug & alcohol treatment provider members. The feedback from you will help us all to strategize together on the issues most important to members. The deadline has been extended to **Monday, August 14**. Thank you in advance for taking the time to complete the survey. ◀

## State Appropriations Bill Becomes Law – ODP Budget Increases

The Pennsylvania General Assembly passed a budget on June 30, 2017, and the Governor, by not signing or vetoing the bill, allowed it to become law. Key budget lines for the Office of Developmental Programs (ODP) were adopted as proposed by the Governor and passed by the House of Representatives. The Community Waiver Program will receive \$1,527,602,000 in state funds (does not include federal matching funds), private Intermediate Care Facilities for people with intellectual disabilities will receive \$128,426,000 in state funds (does not include federal matching funds), the Community-Based Program will receive \$150,734,000 in state funds (no matching federal funds), and Autism Intervention and Services will receive \$26,908,000 in state funds (does not include federal matching funds). According to ODP, these funds will be enough to continue the existing program, increase rates (the first time in many years), create a new Medicaid waiver with a \$70,000 cap, and bring people off the waiting list. Overall, ODP's budget increased by nearly 11 percent compared to last fiscal year. ◀

## CMS Approves ODP Waivers

The Consolidated and Person/Family-Directed Support (P/FDS) Waiver renewal applications submitted to the federal government by the Office of Developmental Programs were approved by the Centers for Medicare and Medicaid Services (CMS), effective July 1, 2017. The [full and complete waiver language](#) can be found on the Department of Human Services website. Although rates have not yet been officially finalized, ODP has said the [draft rates available on the Department of Human Services website](#) are applicable starting July 1, 2017. ◀



## OVR Offers Assistance to Transform “Sheltered Workshops”

The state Office of Vocational Rehabilitation (OVR) issued a [Request for Quotation \(RFQ\)](#) on July 12 to help licensed 2390 vocational facilities (commonly referred to as “sheltered workshops”) transform their services from subminimum wage to competitive-integrated employment. The project, entitled “Systems Transformation and Capacity Building Project,” uses funding from both OVR and the Office of Developmental Programs (ODP).

The overall objective of the RFQ is to help vocational facilities develop business transformation plans, implement workforce development strategies, and engage in provider leadership activities aimed at supporting people with autism and/or intellectual disabilities to successfully transition from subminimum wage work to competitive-integrated employment. This is an initiative that comes after several federal and state laws and policies have been adopted to promote competitive-integrated employment, including the federal [Workforce Innovation and Opportunity Act \(WIOA\)](#), the federal Centers for Medicare and Medicaid Services’ [Home and Community-Based Services rule](#), Governor Wolf’s [Employment First Executive Order 2016-03](#), and subsequent executive order implementation [recommendations](#). In all, 1–3 vendors will be selected to assist a total of 15 vocational facilities across the state. The state is accepting bids until Monday, August 14, 2017. ◀

## Bill to Close State Centers Introduced

State Representative Kerry Benninghoff has introduced legislation that would close the remaining state centers for people with intellectual disabilities and place the proceeds from the closures into a dedicated fund for home and community-based services. [House Bill 1650](#) was introduced on July 8, 2017 and referred to the House of Representatives Health Committee.

Some of the details of the legislation are as follows:

- ▶ By July 1, 2018, the Pennsylvania Department of Human Services (DHS) would be required to develop a draft plan to implement the new law.
- ▶ Public hearings would be held on the draft plan, and then a final plan would be submitted to the Governor and all members of the General Assembly by January 1, 2019.
- ▶ All state centers would close by January 1, 2023.
- ▶ A dedicated fund would be created into which money generated from the sale of state centers would be deposited. (This is a change from current law, which requires the proceeds to be given to the Pennsylvania Department of General Services, not DHS).

There are five state centers still in operation in Pennsylvania. DHS announced in January 2017 that it planned to close Hamburg Center. In addition to that one, the following state centers continue to operate: Polk, Ebensburg, Selinsgrove, and White Haven. According to the Governor’s Executive Budget, over \$301,000,000 in state and federal dollars will go to operate the state centers in fiscal year 2017/18, while the state center census is estimated to be 845. In contrast, over 53,000 Pennsylvanians with an intellectual disability will receive home and community-based services during fiscal year 2017/18, with a total state and federal budget of about \$3.3 billion. Representative Benninghoff represents parts of Centre and Mifflin counties. He also serves as Majority Policy Chairman. ◀



## New Customized Employment Resource Available

A joint effort by the Youth Technical Assistance Center and the Workforce Innovation Technical Assistance Center released a new resource, [\*Essential Elements of Customized Employment for Universal Application\*](#). The document is intended to generate a common understanding of "customized employment" (CE) between funding agencies and providers, while also informing requests for proposals for CE training and to evaluate the quality of CE services and outcomes. The two organizations entered into a partnership with Griffin-Hammis Associates, TransCen, Inc., Marc Gold & Associates, and Virginia Commonwealth University to develop a document that identifies the essential elements of CE as a guide for their universal application across service delivery and training providers. Representatives from the federal Office on Disability Employment Policy and federal Rehabilitation Services Administration have reviewed and approved the content of the document. ◀



## Attachment-Based Family Therapy Workshop

RCPA is excited to offer Attachment-Based Family Therapy (ABFT) to members and non-members. We will be hosting a one-day workshop (Nov 15) or a three-day workshop (Nov 15, Dec 5, & Dec 6) in order to promote this evidence-based practice to providers. ABFT is proven effective with adolescents ages 12–24 who struggle with depression, suicidal ideation, and trauma. It is a manualized family therapy model specifically designed to target family and individual processes associated with adolescent suicide and depression. ABFT emerges from interpersonal theories that suggest adolescent depression and suicide can be either precipitated, exacerbated, or buffered against by the quality of interpersonal relationships in families. It is a trust-based, emotion-focused psychotherapy model that aims to repair interpersonal ruptures and rebuild an emotionally protective, secure-based parent-child relationship. See flyer for details. It is imperative that we have at least 30 participants for each day of the workshop to deliver the training successfully. Our goal is to build upon the successful delivery of this training and offer other staff development opportunities in the near future. Your interest and support is greatly appreciated! ◀

## The 20th Interagency Conference Coming in 2018

The OMHSAS Children's Bureau staff and a committed conference planning committee are excited to announce the 20th Interagency Conference in State College, PA on April 30 through May 2, 2018. The conference will combine the Child and Adolescent Service System Program (CASSP) conference of yesteryear with the System of Care Learning Institutes to incorporate both CASSP principles and SOC standards. The conference will bring together all of the child-serving agencies, as well as researchers, advocates, youth, young adults, and families to share information about the meeting the behavioral health needs of our youth, young adults, and families. Please see the [Save the date](#) flyer for more details. ◀

## SWAN Rates Work Group

RCPA, along with Pennsylvania Council for Children, Youth and Family Services (PCCYFS) is facilitating the invitation process for the SWAN Rates Work Group. The work group will have volunteers from SWAN affiliate agencies and will discuss the time and cost data collection system. The Office of Children, Youth and Families (OCYF) will engage providers in a discussion related to the current tracking system and its utility. OCYF will encourage providers to have recommendations on how to improve the process, as well as ideas about how to collect the data, specifically if the belief is that the current system is not working. Lastly,

if providers have effective tools that are currently being used to track time and cost information within their agencies, it would be helpful to share these tools with the work group. The work group is being formed due to issues and challenges shared by SWAN affiliates related to the collection of time and cost data that OCYF used to construct the new rates for adoption/permanency services. If you have any other questions related to the work group and its goals, please contact [Carrie Keiser](#), SWAN Director, at OCYF. ◀



### Skills of Central PA Position Open

**Skills of Central Pennsylvania, Inc.** is seeking a Regional Vice President for the Centre, Lycoming, Clinton, Huntingdon, Mifflin, and Juniata counties. The successful candidate will report to the President/CEO and will be responsible for the administrative, fiscal, and operational supervision of all of the Residential and Community Services provided within the assigned region. In addition to managing the day to day operations, the Vice President is responsible for assisting with the development, implementation, and monitoring of policies and procedures; assuring quality improvement and quality assurance standards are met or exceeded; assuring regulatory compliance; development, implementation, and control of the budget for the assigned regions; implementation of the strategic plan; actively participating as a member of the senior management; development of new and/or modified program opportunities; and most importantly, he/she is responsible for fostering open communication, motivating and training staff to assure the highest level of quality for the programs. The Vice President will have demonstrated knowledge and experience in working with the county MH/ID offices as well as the state offices of ODP and OMHSAS.

Master's degree in Business Administration, Special Education, Psychology, Social Work, Rehabilitation Counseling or related field with 3 years senior management level experience OR Bachelor's degree in one of the above-related areas with 5 years' experience at a senior management level is required.

Skills offers a competitive and comprehensive benefit package and salary will be commensurate with experience. [Apply online](#) or submit your resume [via email](#). EOE





Events subject to change; members will be notified of any developments

## August

<b>Tuesday, August 8</b>	12:00 pm – 1:00 pm	IPRC Advocacy, Education & Membership Committee <i>Conference Call</i>
<b>Wednesday, August 9</b>	10:00 am – 3:00 pm	Human Resources Committee <i>Penn Grant Centre</i>
<b>Thursday, August 10</b>	12:00 pm – 1:00 pm EDT	IPRC Webinar Adaptive Community Recreation
<b>Tuesday, August 15</b>	12:15 pm – 1:00 pm	IPRC Outcomes & Best Practices Committee <i>Conference Call</i>
<b>Wednesday, August 16</b>	1:00 pm – 3:00 pm	Webinar Federal ORP Requirements: Preserving Patient Safety and Access Through Compliance <i>RCPA Conference Room</i>
<b>Thursday, August 17</b>	10:00 am – 12:30 pm	Outpatient Rehabilitation Committee <i>RCPA Conference Room</i>
<b>Thursday, August 31</b>		Marijuana Update: New Legislation, Clinical Considerations, and Evidence-Based Indications <i>Best Western Premier</i> 800 East Park Dr Harrisburg, PA 17111

## September

<b>Thursday, September 7</b>	10:00 am – 12:30 pm	Medical Rehabilitation Committee <i>RCPA Conference Room</i>
<b>Tuesday, September 12</b>	12:00 pm – 1:00 pm	IPRC Advocacy, Education & Membership Committee <i>Conference Call</i>
<b>Tuesday, September 12</b>	12:30 pm – 3:30 pm	Drug & Alcohol Committee <i>Penn Grant Centre</i>
<b>Wednesday, September 13</b>	9:30 am – 12:00 pm 1:00 pm – 4:00 pm 1:00 pm – 4:00 pm	Mental Health Committee Children's Division <i>Penn Grant Centre</i> Criminal Justice Committee <i>RCPA Conference Room</i>
<b>Thursday, September 14</b>	9:15 am – 11:15 am 12:15 pm – 4:00 pm	Supports Coordination Organization Subcommittee Intellectual/Developmental Disabilities Committee <i>Penn Grant Centre</i>
<b>Tuesday, September 19</b>	11:00 am – 3:00 pm	BH-MCO/RCPA Task Force Meeting <i>Penn Grant Centre</i>
<b>Tuesday, September 19</b>	12:15 pm – 1:00 pm	IPRC Outcomes & Best Practices Committee <i>Conference Call</i>
<b>Wednesday, September 20</b>	10:00 am – 2:00 pm	Brain Injury Committee <i>Penn Grant Centre</i>
<b>Thursday, September 21</b>	1:00 pm – 3:30 pm	Physical Disabilities and Aging Division <i>Penn Grant Centre</i>